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Bib Data Sheet

CONFIRMATION NO. 1996

SERIAL NUMBER 10/796,551	FILING DATE 03/09/2004  RULE	CLASS 271	GROUP ART UNIT 3651	ATTORNEY DOCKET NO. D-1217 R3
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## APPLICANTS

H. Thomas Graef, Bolivar, OH;  
Kenneth C. Kontor, Chesterland, OH;  
Michael Harty, North Canton, OH; Brian Jones, Navarre, OH;

## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/453,146 03/10/2003 Yes L.N.

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE  
GRANTED

\*\* 05/25/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged <i>[Signature]</i> L.N. Examiner's Signature Initials	OH	15	17	1

## ADDRESS

28995  
RALPH E. JOCKE  
walker & jocke LPA  
231 SOUTH BROADWAY  
MEDINA, OH 44256

## TITLE

Cash dispensing automated banking machine and method

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees / Processing Ext
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